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PTO/SB/05 (03-01)
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## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. LOJM-9992

First Inventor DOBRONSKY

Title SYSTEM & MC11-0 Foll DYNAMIC...

Express Mail Label No. ET 449195100VS

	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents					
		ADDRESS TO: Box Patent Application Washington, DC 20231					
1. X Fee Transmittal For (Submit an original and a case 37 CFR 1.27. 3. Specification (preferred arrangement) - Descriptive title - Cross Reference - Statement Regalance - Reference to see or a computer p - Background of case 3 case	[Total Pages ]  set forth below) of the invention e to Related Applications arding Fed sponsored R & D quence listing, a table, rogram listing appendix the Invention of the Invention n of the Drawings (if filed) ption						
b. Copy from a (for continua)  i. DELET Signed sta named in t 1.63(d)(2)  6. Application Data	[ Total Pages ]  Inted (original or copy) prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)  ION OF INVENTOR(S) tement attached deleting inventor(s) he prior application, see 37 CFR and 1.33(b).  Sheet. See 37 CFR 1.76	11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17. Other:					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) Prior application information. Examiner John CABECA Group Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
	19. CORRESPONDE						
Customer Number or Bar Co	ode Label (Insert Customer No. or Attach bar (	or Correspondence address below					
Name	JOSEPH MURPHY						
	LAWOFFICES OF JOSEPH MURPHY						
Address	101 WEST & SIR 5	7 A 130 /					
City	New York	State NY Zip Code 100/1					
Country	VS Telep	phone 877-782-5460 Fax 877-472-0116					
Name (Print/Type)	Joseph murphy	Registration No. (Attorney/Agent) 3 6, 6/7					
Signature	Avry	Date 23 MAY 2001					

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## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

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Co	omplete if Known	
Application Number	NOT YET ASSIGNED	
Filing Date	23MAY2001	
First Named Inventor	DOBRONSKY	
Examiner Name		
Group Art Unit		
Attorney Docket No.	LOJM-9992	

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated food and credit any overnousments to:	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to:  Deposit	Large Small				
Account	Entity Entity Fee Fee Fee Fee Fee Description	Fee Paid			
Number Deposit	Fee Fee Fee Fee Fee Description  Code (\$) Code (\$)	Tee Falu			
Account Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status	139 130 139 130 Non-English specification				
See 37 CFR 1 27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed:  Check Credit card Money Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month				
	118 1,390 218 695 Extension for reply within fourth month				
201	128 1,890 228 945 Extension for reply within fifth month				
106 320 206 160 Design filing fee 107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 355	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional				
Fee from Extra Claims <u>below</u> Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims -20** = X =	143 440 243 220 Design issue fee				
Independent Claims - 3** = X = =	144 600 244 300 Plant issue fee				
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner				
	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection				
104 270 204 135 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a))				
109 80 209 40 ** Reissue independent claıms over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 0.6	Other fee (specify)				
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	2.0			

SUBMITTED BY

Name (Print/Type)

Signature

Complete (if applicable)

Registration No. (Attorney/Agent)

Registration No. (Attorney/Agent)

Date

Complete (if applicable)

Telephone 877 782 5460

Date

23 // Aly 2001

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